## **Respite**

Respite is provided to participants unable to care for themselves and is the temporary furnished on a short-term, intermittent basis for relief to the usual non-paid caregiver(s). from the continuous support and care of the individual to allow the caregiver to pursue personal, social, and recreational activities such as personal appointments, shopping, attending support groups, club meetings, and religious services, or going to entertainment or eating venues, and on vacations. Components of the respite service are supervision, tasks related to the individual's physical and psychological needs, and social/recreational activities. Services are provided on a short term basis because of the absence or need for relief of those unpaid persons who normally provide care for the individual. These Respite services may be provided in the individual's living situation home and/or in the community in the private residence of an independent respite provider or in a provider operated Group Home or Extended Family Home. Meals provided as part of these services shall not constitute a "full nutritional regimen" (3 meals per day).

## Limits on the amount, frequency, or duration:

Respite is available only to those individuals who live with their usual non-paid caregiver(s). The term "usual non-paid caregiver" means a person who resides with the individual, is not paid to provide services, and is responsible on a 24-hour per day basis for the care and supervision of the individual.

Respite services cannot be used as adult/child care while the parents work to allow the caregiver to accept or maintain employment or attend school.

The amount of authorized services for respite services is not determined using the objective assessment process. Each waiver service must be prior authorized to avoid duplicative billing with other waiver services.

Payment for respite does not include payments made, directly or indirectly to members of the individual's immediate family, defined as parent (biological, step, or adoptive), spouse, or child (biological, step, or adopted).

Respite cannot be provided by members of the individual's immediate household.

These services may be provided in the individual's living situation and/or in a provider operated residential community setting.

All waiver services To avoid duplicative billing with other waiver services, respite providers must be prior authorized within the following guidelines:

1. The tasks to be performed to meet the needs of the individual are documented in the ISP.

- 2. For respite services, a unit is defined as an hour, and a maximum of 12 hours per calendar day may be billed. or if eight or more hours are provided in a calendar day, a day. Respite cannot exceed 30 days per waiver year; No more than 360 hours per waiver year may be authorized (AD waiver allows 360 hours.);
- 3. Unused respite hours are not carried over into the next waiver year;
- 4. Waiver services must be prior authorized;
- 5. The date of waiver services authorization is the date that each provider is approved to begin, or the date services begin; and
- 6. Respite funding is available from one DHHS program source only.

Federal financial participation is not claimed for the cost of room and board.

